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CONFIRMATION NO. 4599

<b>SERIAL NUMBER</b> 10/664,560	<b>FILING OR 371(c) DATE</b> 09/17/2003 <b>RULE</b>	<b>CLASS</b> 428	<b>GROUP ART UNIT</b> 1774	<b>ATTORNEY DOCKET NO.</b> 9364
<b>APPLICANTS</b> Howard Thomas Deason, Cincinnati, OH; Wesley Bernard Brokopp JR., Middletown, OH;				
<b>** CONTINUING DATA *****</b> <i>None</i>				
<b>** FOREIGN APPLICATIONS *****</b> <i>None</i>				
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED</b> <b>** 12/09/2003</b>				
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Verified and Acknowledged <input checked="" type="checkbox"/> Allowance Examiner's Signature <i>[Signature]</i> Initials <i>[Initials]</i>		<b>STATE OR COUNTRY</b> OH	<b>SHEETS DRAWING</b> 3	<b>TOTAL CLAIMS</b> 27
			<b>INDEPENDENT CLAIMS</b> 4	
<b>ADDRESS</b> 27752				
<b>TITLE</b> Multi-ply products comprising a consumer accessible tab				
<b>FILING FEE RECEIVED</b> 960	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	